PTO/SB/06 (08-03)
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| PATE   | NT APPLICATION F                      | Sons are required to res              | pond to a collection of inf | ormation unless | I displays a valid OM        | OF COMMER C  B control numb |
|--|---------------------------------------|---------------------------------------|-----------------------------|-----------------|------------------------------|-----------------------------|
| PATENT APPLICATION FEE DETERMINATION RECORD  Substitute for Form PTO-875   |                                       |                                       |                             |                 | Application or Dockel Number |                             |
|  |                                       | · ·                                   | ОТН                         | ER THAN         |                              |                             |
| . FOR  | (Column 1) NUMBER FILED               | (Column 2)                            | SIMALLE                     | TITY            | OR SMAL                      | L ENTITY                    |
| BASIC FEE<br>(37 CFR 1.16(a))  | · · · · · · · · · · · · · · · · · · · | NUMBER EXTRA                          | RATE                        | FEE             | RATE                         | FEE                         |
| TOTAL CLAIMS .<br>(37 CFR 1.16(c))   | -i 20                                 | <del></del>                           |                             | <u>s</u>        | DR ···                       | \$                          |
| INDEPENDENT CLAIMS<br>(37 CFR 1.16(b))   | . minus 20 =                          |                                       |                             | · ;             | OR X \$=                     |                             |
| AUL TIDLE OCCUPANT   |                                       | X \$=                                 |                             | OR X \$ =       |                              |                             |
| 1-11   |                                       |                                       | + \$=                       |                 | R + \$=                      |                             |
| "If the difference in column 1 is less than zero, enter "0" in column 2  |                                       |                                       | TOTAL                       | 0               | R , TOTAL                    |                             |
| CLAIMS AS AMENDED - PART II  |                                       |                                       |                             |                 |                              |                             |
| De HM  | olumn 1) (Co                          | olumn 2) (Column 3)                   | ) CHALLES                   | FID. 0          | R OTHER                      | THAN                        |
| REI ///AN/   |                                       | HEST                                  | Je :                        | IIIY            | SMALL                        | ENTITY                      |
| Z 108/03 AME   | AFTER PREV                            | MBER PRESENT<br>MOUSLY EXTRA<br>DEFOR |                             | ADDI-<br>HONAL  | RATE                         | ADDI-<br>TIONAL             |
| O (2) CER   1g(r))   | Minus                                 | 30 =                                  | X \$ =                      | FEE             |                              | FEE                         |
| Z Independent (37 CFR + 16(b))   | 5 Minus                               | 5                                     | X 1 =                       | GR              | X \$=                        |                             |
| PARS I PRESENTATION OF MULTIPLE DEPENDENT CLAIM (1)7 CFR LIBION  |                                       |                                       |                             |                 |                              |                             |
| TOTAL OR +5 =  |                                       |                                       |                             |                 |                              |                             |
| re HM Tolu   | umn 1) (Coli                          | umn 2) (Column 3)                     | ADD'L FEE                   | OR              | ADD'L FEE                    |                             |
| REMA   | AIMS HIGH<br>AINING NUMI              | EST                                   |                             |                 |                              |                             |
| MEN  | TER PREVIO                            | USLY EXTRA                            | TIC                         | DDI-<br>DNAL    | RATE                         | ADDI-<br>TIONAL             |
| (1), (10 1 10(0))  | filinus "                             | 5 -                                   | X 5 = F                     | EE              |                              | FEE                         |
| Z Independent (37 CFR 1 16(b))   | Atinus 3                              |                                       | x s =                       | OR OR           | × s =                        |                             |
| FIRST PRESENTATION OF  |                                       | OR                                    | X \$=                       |                 |                              |                             |
| n n  |                                       |                                       | TOTAL                       | OR              | + \$=                        |                             |
| the American   | n 1) (Colum                           | 2) (0.1                               | ADD'L FEE                   | OR              | ADD'L FEE                    |                             |
| O 1/1/ CLAH  | MS HIGHES                             | ST                                    | <u> </u>                    |                 |                              |                             |
| Z01/04/7)\$ AFTE   | R                                     | SLY EXTRA                             | RATE ADI                    |                 |                              | ADDI-                       |
| Total  | 3 Minus "                             | ) =                                   | FE                          |                 |                              | FEE                         |
| Z Independent (37 CFR 1.16(b))   | Minus                                 | =                                     | × \$                        | OR              | X \$=                        |                             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))  |                                       |                                       |                             | OR OR           | x \$= .                      |                             |
|  | Could (                               | 7. 3. 7. 1.10(0))                     | +\$_ =                      | OR L            | + \$=                        |                             |
| * If the entry in column 1 is less than the  |                                       |                                       |                             |                 |                              |                             |
| "" If the "Highest Number Provinces of the Third SPACE is less than 20, enter "20"   |                                       |                                       |                             |                 |                              |                             |
| The 'Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  Collection of information is required by 37 CFR 1.16. The information is |                                       |                                       |                             |                 |                              |                             |

This This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to fife (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submilling the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form ant/lor suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS